

JUL. 11. 2006 4:48PM
TO: USPTO

ZILKA-KOTAB, PC

NO. 3535 P. 1

ZILKA-KOTAB
PC
ZILKA, KOTAB & FEECE™

RECEIVED
CENTRAL FAX CENTER

JUL 11 2006

100 PARK CENTER PLAZA, SUITE 300
SAN JOSE, CA 95113

TELEPHONE (408) 971-2573
FAX (408) 971-4660

FAX COVER SHEET

| Date: | July 11, 2006 | Phone Number | Fax Number |
|-------|----------------|--------------|------------|
| To: | (571) 273-8300 | | |
| From: | Kevin J. Zilka | | |

Docket No.: TRKYP012

664 77
App. No: 10/644,087

Total Number of Pages Being Transmitted, Including Cover Sheet: 02

Message:

Please deliver to Examiner Nelson.

Thank you,

Kevin J. Zilka

Original to follow Via Regular Mail Original will Not be Sent Original will follow Via Overnight Courier

The information contained in this facsimile message is attorney privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copy of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone (if long distance, please call collect) and return the original message to us at the above address via the U.S. Postal Service. Thank you.

IF YOU DO NOT RECEIVE ALL PAGES OR IF YOU ENCOUNTER
ANY OTHER DIFFICULTY, PLEASE PHONE April
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

July 11, 2006

PTO/SB/122 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS**
Application

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

| | |
|------------------------|---------------------------|
| Application Number | 10/644,087 PP |
| Filing Date | 09/16/2003 |
| First Named Inventor | Chester L. Mallory et al. |
| Art Unit | 3637 |
| Examiner Name | J. Nelson |
| Attorney Docket Number | TRKYP012 |

Please change the Correspondence Address for the above-identified patent application to:

The address associated with
Customer Number:

28875

OR

Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- Applicant/Inventor
- Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or agent of record. Registration Number 41,429
- Registered Practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or Printed
Name Kevin J. ZilkaDate 7/11/06Telephone 408-971-2573

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.